

## BioMaryland-Medicen Paris Region Innovation Funding Initiative

### *Initial Proposal*

Date			
Project Title			
Technology area (keywords)			
<b>Company/Organization nr 1</b>			
Name of the company/organization			
Address			
Contact person			
Phone/mobile			
E-mail			
Federal EIN or SIRET			
Type (C Corp, S Corp, 501, LLC, LLP, SA, SAS, Sarl, etc.)		Where and when was business incorporated?	<div style="background-color: #d9e1f2; padding: 2px;">Place:</div> <div style="background-color: #d9e1f2; padding: 2px;">Date:</div>
# Employees	Full-time:	Part-time:	
Date of last balance sheet:			
Annual revenue/turnover: (\$/€):		% from exports:	
Is the company/ organization ...?			
		Y/N	
<sup>1</sup> Minority owned? (Y/N)			
<sup>1</sup> Women owned? (Y/N)		If "Yes," provide details	
A university spin-out?		Which university?	
Licensing technology from a Maryland/French academic organization?		Which organization(s)?	

<sup>1</sup> Mandatory for US companies/organizations only

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A subsidiary of another company?		Parent name/location?	
Has your company/organization applied for funding with Maryland/French government programs? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
Has your company/organization raised funding from other sources? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
<b>Company/Organization nr 2</b>			
Name of the company/organization			
Address			
Contact person			
Phone/mobile			
E-mail			
Federal EIN or SIRET			
Type (C Corp, S Corp, 501, LLC, LLP, SA, SAS, Sarl, etc.)		Where and when was business incorporated?	Place:
			Date:
# Employees	Full-time:	Part-time:	
Date of last balance sheet:			
Annual revenue/turnover: (\$/€):		% from exports:	

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Is the company/ organization ...?			
	Y/N		
<sup>2</sup> Minority owned? (Y/N)			
<sup>2</sup> Women owned? (Y/N)		If "Yes," provide details	
A university spin-out?		Which university?	
Licensing technology from a Maryland/French academic organization?		Which organization(s)?	
A subsidiary of another company?		Parent name/location?	
Has your company/organization applied for funding with Maryland/French government programs? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
Has your company/organization raised funding from other sources? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
<b>Company/Organization nr 3</b>			
Name of the company/organization			
Address			
Contact person			
Phone/mobile			
E-mail			
Federal EIN or SIRET			
Type (C Corp, S Corp, 501, LLC, LLP,SA, SAS, Sarl, etc.)		Where and when was business incorporated?	Place:
			Date:
# Employees	Full-time:	Part-time:	
Date of last balance sheet:			

<sup>2</sup> Mandatory for US companies/organizations only

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Annual revenue/turnover: (\$/€):		% from exports:	
Is the company/ organization ...?			
	Y/N		
<sup>3</sup> Minority owned? (Y/N)			
<sup>3</sup> Women owned? (Y/N)		If "Yes," provide details	
A university spin-out?		Which university?	
Licensing technology from a Maryland/French academic organization?		Which organization(s)?	
A subsidiary of another company?		Parent name/location?	
Has your company/organization applied for funding with Maryland/French government programs? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
Has your company/organization raised funding from other sources? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
<b>Company/Organization nr 4</b>			
Name of the company/organization			
Address			
Contact person			
Phone/mobile			
E-mail			
Federal EIN or SIRET			
Type (C Corp, S Corp, 501, LLC, LLP,SA, SAS, Sarl, etc.)		Where and when was business incorporated?	Place:
			Date:

<sup>3</sup> Mandatory for US companies/organizations only

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# Employees	Full-time:	Part-time:	
Date of last balance sheet:			
Annual revenue/turnover: (\$/€):		% from exports:	
Is the company/ organization ...?			
	Y/N		
<sup>4</sup> Minority owned? (Y/N)			
<sup>4</sup> Women owned? (Y/N)		If "Yes," provide details	
A university spin-out?		Which university?	
Licensing technology from a Maryland/French academic organization?		Which organization(s)?	
A subsidiary of another company?		Parent name/location?	
Has your company/organization applied for funding with Maryland/French government programs? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
Has your company/organization raised funding from other sources? (Y/N)		If successful please name the program(s), dates and amount received (Up to 5 most recent)	
<b>Project budget</b>			
Total Project Budget* (see description on the last page)		Expected Project Duration (typically 2 years or less)	
Requested Funds*			
Other Funds*		Source of Other Funds	
Leveraged Funds* (If applicable)		Source of Leveraged Funds	

<sup>4</sup> Mandatory for US companies/organizations only

## BioMaryland-Medicen Paris Region Innovation Funding Initiative

### *Initial Proposal*

#### Project description

#### 1) SUMMARIZE YOUR PROJECT GOALS AND EXPLAIN THE INNOVATION RATIONAL

State (1) the project goal(s); (2) describe the primary R&D activities in the project; (3) describe how the project goal(s) fits into the product development plan or service, and (4) describe how the project benefits the organization by addressing an unmet need(s). (Include if the objectives at the end of this project may result in exports, settlement abroad, joint venture subsidiary abroad, and/or an ongoing relationship with a collaborative research partner.)

1000 word limit

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### *Initial Proposal*

#### 2) SUMMARIZE YOUR PROJECT TOTAL BUDGET DETAILS

Include total project expenses, leveraged or additional funding in place or anticipated (and by when), their sources, dedicated project staff and their annual labor costs and identify which expenses are to be supported by this award.

1000 word limit

**NOTE:**

- Clearly distinguish the financial contribution to the project from Maryland partners and French partners (including the requested budget from this award).
- Maryland companies may not use this award to fund university overhead costs.

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#### 3) SUMMARIZE THE EXPECTED OUTCOMES (PRODUCT, SERVICE OR PROCESS) & FUTURE COMMERCIALIZATION OBJECTIVES

500 word limit

#### 4) MANAGEMENT TEAM AND COMPANY HISTORY

Describe the management team and include a brief company history (formation date, existing products, etc.).

500 word limit



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#### 5) COLLABORATIONS

Describe the formal collaborations with other organizations that will occur during this project.

500 word limit

#### 6) INTELLECTUAL PROPERTY AND PATENT LANDSCAPE

Cite the compelling aspects of the intellectual property (IP) or proprietary knowledge protection related to this project. Note any complementary or blocking patents or technology that would need to be licensed to successfully commercialize this product (freedom to operate).

500 word limit

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#### **7) SUMMARIZE YOUR MARKET ANALYSIS (EXPLAIN THE MARKET NEEDS THAT YOUR PROJECT ADDRESSES)**

Provide an analysis of (1) the target market and market size, and (2) the competitor companies or organizations with similar products or services in development or on the market.

500 word limit

#### **8) REGULATORY PLAN (if applicable)**

Summarize the current status of the regulatory process and the future plans for moving the product through the regulatory path.

500 word limit

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## IMPORTANT

- **All French companies** should submit their *Initial Proposals* to **Medicen Paris Region**, and here after as signatories of the Initial Proposal form, authorize and accept that Medicen Paris Region transfers the confidential form to Bpifrance, the French funding agency, to which final applications for funding will be sent by French partners. Together with this form, French companies must submit to Medicen Paris Region their last balance sheets and their equity ownerships (diagram and percentages of participation).
- **All Maryland companies** should submit their *Initial Proposals* to the **BioMaryland Center**.
- Graphics (e.g., figures and graphs) should not be entered into the *Initial Proposal* form but may be included only in a one page attachment, with figures clearly labeled and referenced by those labels in the application. Tables may be included as text in the application forms, but should not be inserted as graphics.
- All responses should be in *Arial 11* font.
- There is no requirement to submit a resume or CV.
- Initial Proposals must be submitted to the BioMaryland Center (Maryland Companies) and to Medicen Paris Region (French companies) by March 13, 2014.
- All companies must submit a business plan and the proposed Consortium Agreement by March 22, 2014. In addition, French companies must complete and submit the ADICI application form at Bpifrance and submit it as well by March 27, 2014

## DEFINITIONS

<u>Total Project Budget</u>	Total funding needed to accomplish the proposed project.
<u>Requested Funds</u>	Funding requested from the <i>BioMaryland Center and Bpifrance</i> .
<u>Other Funds</u>	Amount and Source of other funding required to meet the Total Project Budget. The company's is expected to contribute to the total costs of the project for its completion.
<u>Leveraged Funds</u>	Other funding received that is related to the Project, enabled by this award, or anticipated upon Project's completion (e.g., investment, grant).

## MORE INFORMATION

**BioMaryland Center**  
[www.Bio.Maryland.gov](http://www.Bio.Maryland.gov)  
 Funding (Joint)

**Paris Medicen Region**  
<http://www.medicen.org/en>

**BpiFrance**  
[www.Bpifrance.fr](http://www.Bpifrance.fr)  
 (ADICI)



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*Initial Proposal*